PTO/SB/17 (10-08)
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Effective on 12/08/2004, Fees pursuant to the Consolidated Appropriatons Act, 2005 (H.R. 4818).				Complete if Known					
				Application Nun	nber 10	10/538,730			
FEE TRANSMITTAL				Filing Date	06	06/13/2005			
For FY 2009				First Named Inv	entor Gl	GUERRET, O.			
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name	BI	BERNSHTEYN, M.			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	17	1796			
TOTAL AMOUNT OF PA	YMENT	(\$) S	810.00	Attorney Docket	t No. FF	R-AM1907NP			
METHOD OF PAYMENT	(check all	that apply)							
Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 01-2717 Deposit Account Name:									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or any underpayments of Credit any overpayments									
fee(s) under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION							<del></del>		
1. BASIC FILING, SEARCH	I, AND EX	AMINATION F	EES						
	FILING FEES SEARCH FEES EXAMINA								
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	<u>F</u> ee (\$	<u>Small Entity</u> 3) Fee (\$)	Fees Paid(\$)		
Utility	330	165	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims							<u>Small Entity</u> <u>Fee (\$)</u> 26 110 195		
Total Claims E	xtra Claim:	s Fee (\$)		Fee Paid (\$)		Fee (\$)	Dependent Claims Fee Paid (\$)		
- 20 or HP = x \$52.00 = \$0.00  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims									
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
	Extra Shee			ach additional 50 or			<del></del>		
100 = 0									
Non-English specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surchar	ge): <u>Req</u> u	est for Continu	ed Exami	ination (RCE)			\$810.00		
SUBMITTED BY				egistration No.					

SUBMITTED BY					
Signature	The Ell	Registration No. (Attorney/Agent)	42,110	Telephone	215-419-7314
Name (Print/Type)	Thomas F. Roland			Date	May 19, 2010

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.